Form **990** 

# **Return of Organization Exempt From Income Tax**

2016

DLN: 93493307015097 OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

nterna	l Revei	f the Treasur nue Service	► Information about	il security numbers on this form as i t Form 990 and its instructions is at	www IR.	S gov/form			Open to Public Inspection
A Fo	or the	2016 ca		ning 07-01-2016 , and ending 1	2-31-2	016			
		oplicable	C Name of organization WORLD ECONOMIC FORUM USA INC				D Employ	er identif	ication number
	dress o me cha	change	% SARITA NAYYAR				20-390	8371	
	tial ret	-	Doing business as						
Fin	al								
□ Am	ended	ninated I return on pending	Number and street (or P O box if ma 350 MADISON AVENUE 11TH FLOOR	nl is not delivered to street address) Roo	m/suite		E Telephor (212) 7	ne number '03-2300	
ш Арі	Jiicacic	on penang.	City or town, state or province, count NEW YORK, NY 10017	try, and ZIP or foreign postal code			<b>G</b> Gross re	ceints \$ 3	1 974 776
		ŀ	F Name and address of principal	officer	Ты	(a) Is thus		•	2,3, 1,,,,
			SARITA NAYYAR		"	(a) Is this		turn for	□Yes <b>☑</b> No
			350 MADISON AVENUE 11TH FLC NEW YORK, NY 10017	OOR	Н	subord ( <b>b)</b> Are all	linates? subordinat	tes	
Tax	(-even	npt status				include	ed?		☐ Yes ☐No
-		<u> </u>	☐ 501(c)(3) ☐ 501(c)(6) ◀(						instructions)
W	ebsit	e:▶ wefo	orum org/about/world-economic-fo	orum-Ilc		(c) Group	exemption	number	•
<b>C</b> Form	n of or	ganızatıon	✓ Corporation ☐ Trust ☐ Assoc	ciation Other ►	LY	ear of forma	tion 2005	<b>M</b> State	of legal domicile DE
Pai	πI	Sumn	mary						
	<b>1</b> E	_	cribe the organization's mission or	most significant activities					
			ONOMIC FORUM USA INC IS A BU JSINESS CLIMATE BY IMPROVING	SINESS LEAGUE OF ORGANIZATION	NS FORM	IED FOR TH	E PURPOSI	E OF ENF	ANCING THE
בַּ	_	SLUBAL BU	DSINESS CLIMATE BY IMPROVING	THE STATE OF THE WORLD					
ACUVIUES & GOVERNANCE	_								
A A	-								
3				continued its operations or disposed			of its net a		1 -
<b>ರ</b>				g body (Part VI, line 1a)				3	С
Se Se	4	Number o	f independent voting members of	the governing body (Part VI, line 1b	)		•	4	С
	5	Total num	ber of individuals employed in cal-	endar year 2016 (Part V, line 2a) 🛭 .				5	130
124	6	Total num	ber of volunteers (estimate if nec	essary)			•	6	6
•	7a	Total unre	elated business revenue from Part	VIII, column (C), line 12				7a	C
	b	Net unrela	ated business taxable income from	Form 990-T, line 34			ı	7b	C
						Pric	r Year		Current Year
Qi.	8	Contributi	ons and grants (Part VIII, line 1h)				1,991,	160	1,100,57
Ravenue	9	Program s	service revenue (Part VIII, line 2g)				52,721,	611	26,502,930
λċΙ	10	Investmer	nt income (Part VIII, column (A), l	ines 3, 4, and 7d )	l		391,	017	699,692
ш.	11	Other reve	enue (Part VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)	l		6,839,	205	3,671,573
	12	Total reve	nue—add lines 8 through 11 (mus	st equal Part VIII, column (A), line 1	.2)		61,942,		31,974,776
			d sımılar amounts paid (Part IX, c				1,948,	596	956,08
			, , ,	lumn (A), line 4)	l		<u> </u>	0	· (
رم در		•		nefits (Part IX, column (A), lines 5–1	10)		18,958,	767	10,294,262
Se			nal fundraising fees (Part IX, colun		/			0	
Expenses			aising expenses (Part IX, column (D), lir		ŀ			+	
Ä			enses (Part IX, column (A), lines :	· ———	ŀ		25,499,	274	13,558,63
				•	ŀ		46,406,	_	
			enses Add lines 13–17 (must equa	m line 12			15,536,		24,808,984
_ <u> </u>	19	Revenue I	ess expenses Subtract line 16 iro	m line 12		Beginning o			7,165,792 End of Year
Net Assets or Fund Balances						gmmig (	varrent l		2 J. 10al
3afa	20	Total asse	ets (Part X, line 16)				95,559,	109	(
M E	21	Total liabil	lities (Part X, line 26)		.		37,575,	506	(
Fur	22	Net assets	s or fund balances Subtract line 2	1 from line 20			57,983,	603	(
Par	t II	Signa	iture Block						
		alties of pe	rjury, I declare that I have exami	ned this return, including accompan					
	edge nowle		, it is true, correct, and complete	Declaration of preparer (other than	officer)	is based or	all inform	ation of v	which preparer has
,		1.							
		<u></u>					-11-02		
Sign		Signatui	re of officer			Date			
lere	:		NAYYAR COO						
		Type or	print name and title						
			int/Type preparer's name NURA J PARELLO	Preparer's signature LAURA J PARELLO	Date	Chec		PTIN P0108029	5
Paic	ı					self-	employed	. 5100029	<b>-</b>
Prep	oare	71 <u> </u>	rm's name PricewaterhouseCooper	s LLP			's EIN 🟲		
-	On		rm's address > 300 Madison Avenue			Phor	ne no (646)	471-3000	
			New York, NY 10017						
1ay tl	he IR	S discuss t	this return with the preparer show	n above? (see instructions)				$\checkmark$	res 🗆 No
			luction Act Notice, see the sepa			Cat No 1:			Form <b>990</b> (2016

Form	990 (2016)				Page <b>2</b>
Par	Stateme	ent of Program Service Ac	complishments		
	—— Check if S	Schedule O contains a response of	note to any line in this Part III .		🗹
1		he organization's mission	·		
SEE S	CHEDULE O				
2	Did the organizat	tion undertake any cianificant pro	gram services during the year which	were not listed on	
2	_	, ,	gram services during the year wintr		□Yes ✓ No
	•	these new services on Schedule			□ res ⊡ No
3	•		onificant changes in how it conducts	any program	
3	-	lion cease conducting, or make si	-	s, any program	□yes ✓ No
		these changes on Schedule O			Lifes Line
4	•	-			1.1
4			nplishments for each of its three largerequired to report the amount of qu		
		evenue, if any, for each program s		rants and anocations to others, th	c total
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data	1			
4b	(Code	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
	See Additional Data	1			
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data	1			
	See Additional D	ata Table			
4d		ata Table ervices (Describe in Schedule O )			
4d		ervices (Describe in Schedule O )		) (Revenue \$	)

Yes

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Form 990 (2016)

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1	Is	the	
	Sc	he	

	•
Par	t IV
1	Is the

**Checklist of Required Schedules** 

Did the organization receive or hold a conservation easement, including easements to preserve open space.

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . . . . . . . . .

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II . . . .

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**14a** Did the organization maintain an office, employees, or agents outside of the United States? . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . . . . . . .

- organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete
- Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . .
- Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates
- Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?
- 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

- assessments, or similar amounts as defined in Revenue Procedure 98-19?

- Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?

or X as applicable

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII. Section A. line 3, 4, or 5 about compensation of the organization's			

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

organization? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Yes

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24a

24b

24c

24d

25a

25b

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Form 990 (2016)

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No

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Nο

Page 4

orm	990 (2016)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 68	_		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return	2b	Yes	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
·	If res, to line 3a of 3b, did the organization file Form 8880-17	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

orm 9	990 (2016)			Page <b>6</b>
Part	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions		nse to li	
	Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>
Sec	ction A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 0		res	NO
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b  0			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	: Code	-	
10-	Did the annual bear bear bear bounded as a fell-back	10-	Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
11a	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			N -
	form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12-	Vaa	<b></b>
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	<b></b>
	conflicts?	12b		No
	Schedule O how this was done	12c	Yes	ĺ
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			ĺ
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
	· · · · · · · · · · · · · · · · · · ·	16b		
	ction C. Disclosure  List the States with which a copy of this Form 990 is required to be filed▶			
	CA			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
	State the name, address, and telephone number of the person who possesses the organization's books and records  SARITA NAYYAR 350 MADISON AVENUE 11TH FLOOR NEW YORK, NY 10017 (212) 703-2300			- /o-:-

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (E) (A) (F) (B) (C) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation week (list person is both an officer from the from related compensation anv hours and a director/trustee) organization organizations from the for related (W- 2/1099-(W-2/1099organization and Highest Individual emplovee MISC) MISC) organizations Ē related Institutional director 호 below dotted organizations employ 3 line) con trustee P pensat Ě 1 ( (1) ALFRED R BERKELEY BOARD MEMBER 0.0 1 0 (2) SAMUEL DI PIAZZA 0 0 Х BOARD MEMBER 0 0 1 0 (3) WILLIAM W GEORGE O BOARD MEMBER Χ O 0 0 10 (4) SHIRLEY JACKSON BOARD MEMBER 0.0 1 0 (5) KLAUS KLEINFELD 0 Χ 0 BOARD MEMBER 0 0 1 0 (6) JOSEPH P SCHOENDORF X 0 n 0 BOARD MEMBER 0 0 5.0 (7) JIM HAGEMANN SNABE Х 318,894 CHATRMAN 15 0 40 0 (8) JEAN-PIERRE ROSSO 120,000 Х VICE-CHAIRMAN 0 0 2 0 (9) CHERYL MARTIN 542,435 49,660 Х

BOARD MEMBER 38 0 40.0 (10) SARITA NAYYAR . . . . . . . . Х 615,917 CHIEF OPERATING OFFICER 0.0 40 0 (11) JOHN MOAVENZADEH Х 433.577 0 SR DIR /MEMBER MGMT COMMITTEE 0 0 40 0 (12) MICHAEL DREXLER Х 360,387 0 SR DIR /HEAD FIN & INFRA SYS 0.0 40.0

27,110 27.602 26,118 356,554 24,170 0.0 40 0 х 346.051 0 26.163 0 0 40 0 Х 321,693 24,334 0 0 40 0 296,144 20,625 0.0 40 0 454.886 25.778 0 0 Form 990 (2016)

(13) ALAN MARCUS SR DIR /HEAD OF ICT & MEDIA (14) GIANCARLO BRUNO SR DIR /HEAD FIN INSTITUTIONS (15) ZARA INGILIZIAN DIR /HEAD OF CONSUMERS (16) STEPHAN RUI7 SR DIR /HEAD OF N AMERICA

DIR /HEAD OF OPR & FINANCE (17) PAUL SMYKE

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

5

(B)

Description of services

CONSULTING SERVICES

CONSULTING SERVICES

ARCHITECTURAL SVCS

CATERING SERVICES

MAINTENANCE

Νo

(C)

Compensation

26,172,806

1,674,867

369,922

222,660

200,629

Form **990** (2016)

Reportable

(D)

Reportable

Page 8

Estimated

Hame and Hae	hours per week (list any hours for related			in of tor/t	ficer rust	· and a ee)	ì	compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099-		amount o compens from t	sation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	MISC)		organizati relati organiza	ed
(18) MARISOL ARGUETA DE BARILLAS						х		395,015		0		22,246
SR DIR /HEAD OF LATIN AMERICA	0 0 40 0									_		
(19) ELIZABETH DREIER SR DIR/HEAD OF FOOD SEC & AGRI	1					x		323,396		0		27,383
(20) ISABEL MAURO	40 0											
HEAD OF TELECOMMUNICATIONS	0 0	••••				X		285,072		0		28,340
(21) MATTHEW BLAKE	40 0											
HEAD OF FIN & MONETARY SYS	0 0	••••				×		264,188		0		21,200
4.6.1.7.1	<u> </u>				<u> </u>	<u> </u>						
1b Sub-Total					,	`-						
d Total (add lines 1b and 1c)					,			4,572,880	861,329			350,729
Total number of individuals (including bu of reportable compensation from the org.	t not limited to t				e) v	vho re	ceive	ed more than \$100	,000			
											Yes	No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for									nployee on	3		No.
4 For any individual listed on line 1a, is the	sum of ronarta	blo com	nors	atio	n	d otha	.r.c.	mnoncation from t	<u>_</u>			INU
organization and related organizations gr	eater than \$150	ر 9,000,	f "Ye						iie			
individual			•	•	•	•	•			4	Yes	

Position (do not check more

4	For any Indi	,	•																		
7	organization	n and	relate	d or	ganız	ations	gre	ater	than	\$15	0,0	٥٥٧	İf '	Yes,	" cc	mpl	ete	Sch	edule	∋ J f	for

services rendered to the organization? If "Yes," complete Schedule J for such person .

(A)

Name and business address

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

(B)

Average

Name and Title

5

Section B. Independent Contractors 1

SZ

WORLD ECONOMIC FORUM,

3 E 54TH NEW YORK LLC,

12 WEST 21ST STREET NEW YORK, NY 10010

99 MADISON AVENUE NEW YORK, NY 10016

NEUMAN BOGDONOFF INC, 3502 48TH AVENUE

LONG ISLAND CITY, NY 111012421

COLOGNY, GENEVA

750 Lexington Ave NEW YORK, NY 10022 SPECTRA AUDIO DESIGN LTD,

91-93 ROUTE DE LA CAPITÉ CH-1223

MONTROY ANDERSEN DEMARCO GROUP INC,

compensation from the organization ▶ 7

Part	VΙ	Statement of	Revenue									rage <b>3</b>
				a respo	onse or note to any	line in th	ıs Part VII:	ι				🗆
				·		( <b>A</b> Total re	١)	Rela ex fur	(B) ited or empt iction	(C) Unrelate business revenue	s	(D) Revenue excluded from ax under sections
	1:	a Federated campaig	ns	1a				rev	renue			512-514
nts nts		<b>b</b> Membership dues		1b								
irai 10 u		c Fundraising events		1c								
S. C.		<b>d</b> Related organizatio		1d	75,748							
Gifts, Grants illar Amounts		e Government grants (c			1,024,827							
im.			•	1e	1,024,827							
ien S		f All other contributions and similar amounts n above		1f								
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution	ons included									
Contributions, and Other Sim		in lines 1a-1f \$ 1-15 <b>Total.</b> Add lines 1a	Lf	<del>.</del> .	•	1.3	100,575					
	_				Business		100,373					
JU.	2a	FINANCIAL SERVICES S	ECTOR			900099	7,0	40,107	7,040	0,107		
ž Ž	b	INVESTOR SECTORS				900099	6,3	326,025	6,326	5,025		
3	c	INFORMATION & COMM	UNICATION TEC	HNOLO	GIES	900099	4,7	795,218	4,79!	5,218		
ž.	d	CONSUMER SECTOR				900099		28,942	3,928			
S	e	MOBILITY SECTOR				900099	•	781,742	3,78:			
Program Service Revenue	f	All other program se	rvice revenue				•	30,902	630	0,902		
ě	g	Total.Add lines 2a-2i	f		<b>▶</b> 26,	502,936						
	3	Investment income (i	ncluding divid	ends,	nterest, and other	1					$\overline{}$	
		similar amounts) .			•	•	699,69					699,692
		Income from investme		-		•		0			$\rightarrow$	
	5	Royalties	(ı) Rea		(II) Personal	• <u> </u>	'	9			$\longrightarrow$	
	6a	Gross rents	(I) Rea		(II) Fersonal	$\dashv$						
	ŀ	Less rental expenses										
		Rental income or		0		0						
		(loss)										
	•	Net rental income o	r (loss)	•			ı	0				
			(ı) Securit	ies	(II) Other	4						
	7 a	Gross amount from sales of										
		assets other than inventory										
	ŀ	Less cost or				-						
		other basis and sales expenses										
	•	Gain or (loss)				7						
	•	Net gain or (loss)			<b>&gt;</b>	]	ı	0				
•	8a	Gross income from food (not including \$		ents of								
nue		contributions reporte	ed on line 1c)									
<b>छ</b> ≥		See Part IV, line 18		а	C	_						
ď		Less direct expense		b								
Other Revenue		: Net income or (loss)			ents •			0			$\longrightarrow$	
ŏ	90	Gross income from g See Part IV, line 19		es								
				а	(							
		Less direct expense		b	C							
		Net income or (loss)		activit	ies <b>&gt;</b>			0			$\longrightarrow$	
	10	Gross sales of invent returns and allowand	ces									
				а	ď	)						
	ŀ	Less cost of goods s	sold	b	C							
	Ý	Net income or (loss)		inven			-	0				
		Miscellaneous			Business Code		2.675.40		2.675.404			
	11	- <b>a</b> OTHER INTER-AFFII	LIATE INCOME	Ē	54161	١	3,675,49	4	3,675,494			
		-									$\bot$	
	t	OTHER MISCELLANE	OUS INCOME		90009	9	5,56	/	5,567			
											$\bot$	
	•	FOREIGN EXCHANGI	E LOSS		90009	9	-9,48	8	-9,488			
		All other revenue .									$\Box$	
	•	Total. Add lines 11a	-11d		•		3,671,57	3				
	12	<b>Total revenue.</b> See	Instructions				31,974,77	6	30,174,509		T	699,692
							1-1 11//	-	,_, ,,505			Form <b>990</b> (2016)

Forr	n 990 (2016)				Page <b>10</b>
	IT IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	956,085			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,003,031			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	6,703,200			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	505,313			
9	Other employee benefits	644,123			
10	Payroll taxes	438,595			
11	Fees for services (non-employees)				
ä	a Management	0			
ı	D Legal	178,181			
(	Accounting	11,995			
•	il Lobbying	0			
•	e Professional fundraising services See Part IV, line 17	0			
1	Investment management fees	0			
9	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,837,944			
12	Advertising and promotion	0			
13	Office expenses	142,048			
14	Information technology	123,995			
15	Royalties	0			
16	Occupancy	2,052,123			
17	Travel	1,563,080			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials •	0			
19	Conferences, conventions, and meetings	154,573			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	510,547			-
23	Insurance	94,866			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O )				
	a PROGRAM DEVELOPMENT	691,308			
	b OTHER STAFF RELATED	99,218			
	c SOCIAL PROGRAM/STAFF EVENTS	54,971			
	d PRINTING AND DOCUMENTATION	43,788			
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	24,808,984			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Net Assets or Fund Balances

27

28

29

30

31

32

33 34 Page **11** 

0

0

Form **990** (2016)

(B)

				Beginning of year		End of year
	1	Cash-non-interest-bearing		1,402,826	1	0
	2	Savings and temporary cash investments .		40,519,993	2	0
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		5,451,737	4	0
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L		0	5	0
ssets	7	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L  Notes and loans receivable, net	n 4958(c)(3)(B), and itions of section 501(c)(9)	0 58.952	6	0
Se	8	,	inventories for sale or use			
AS	9	Prepaid expenses and deferred charges		8,168,813	8 9	0
	-	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	0,100,010		
	b	Less accumulated depreciation	10b	2,337,787	10c	0
	11	Investments—publicly traded securities •	37.286.484	11	0	
	12	Investments—other securities See Part IV, line	0	12	0	
	13	Investments—program-related See Part IV, line		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		332,517	15	0
	16	Total assets.Add lines 1 through 15 (must equ		95,559,109	16	0
	17	Accounts payable and accrued expenses		3,700,601	17	0
	18	Grants payable		0	18	0
	19	Deferred revenue		31,749,698	19	0
	20	Tax-exempt bond liabilities		0	20	0
رم،	21	Escrow or custodial account liability Complete F		0	21	0
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee	officers, directors, trustees,			
ap		persons Complete Part II of Schedule L		0	22	0
Ξ	23	Secured mortgages and notes payable to unrela	ted third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated	third parties	0	24	0
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17-24) Complete Part X of Schedule D		2,125,207	25	0
	26	Total liabilities. Add lines 17 through 25		37,575,506	26	0

57.983.603

57,983,603

95,559,109

27

28

29

30

31

32

33

34

0

Organizations that follow SFAS 117 (ASC 958), check here >  $\square$  and

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

2c

3a

3b

No

Form 990 (2016)

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

## **Additional Data**

Software Version: EIN:

Name: WORLD ECONOMIC FORUM USA INC

Software ID:

**EIN:** 20-3908371

Form 990 (2016)
Form 990, Part III, Line 4a:

Form 990, Part III, Line 4a:
INDUSTRY RELATED PROGRAM SERVICES FOR THE CONSUMER SECTOR

#### Form 990, Part III, Line 4b: INDUSTRY RELATED PROGRAM SERVICES FOR THE FINANCIAL INSTITUTIONS SECTOR

# Form 990, Part III, Line 4c: INDUSTRY RELATED PROGRAM SERVICES FOR THE INFORMATION TECHNOLOGY TELECOMMUNICATIONS SECTOR

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

INDUSTRI KELATE	D PROGRAM SERVICES FOR THE			
(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)

MOBILITY SECTOR

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

INDUSTRY RELATED PROGRAM SERVICES FOR THE

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$

INVESTORS SECTOR

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code ) (Expenses \$ Including grants of \$ ) (Revenue \$ )

ALL OTHERS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493307015097 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number WORLD ECONOMIC FORUM USA INC. 20-3908371 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed ) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e q, program service, describe for and investments and independent fundraising, program specific type of region in region contractors in services, investments, grants service(s) in region region to recipients located in the region) (1) Europe (Including Iceland and 956,085 Grantmakınd Greenland) (2) (3) (4) (5) 956,085 3a Sub-total b Total from continuation sheets to Part I 956.085 c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2016

(4) (5) (6)

(7) (8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3** 

Schedule F (Form 990) 2016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or assistance (b) Region (a) Description

(a) Type of grant of assistance	(D) Region	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)							
( 2)	•						

			assistance	assistance	(book, FMV, appraisal, other)
(1)					
( 2)					

(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2016		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	☐ Yes	<b>✓</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☐ Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	□Yes	<b>☑</b> No

Schedule F (Form 990) 20	16 Page <b>5</b>
Provide the amounts of method); a	ntal Information e information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide nal information (see instructions).
Return Reference	Explanation
MONITORING PROCEDURES- FORM 990, SCHEDULE F, PART I, LINE 2	THE GRANT AGREEMENT STIPULATES THAT ALL OF THE GRANT FUNDS ARE TO BE USED ONLY FOR THE SPECIFIC PURPOSES AGREED UPON, WHICH PURPOSES ARE WITHIN THE GRANTOR'S AND GRANTEE'S EXEMPT MISSIONS AS DESCRIBED IN THE ORGANIZING DOCUMENTS GRANTEE AGREED TO FURNISH TO THE GRANTOR WITHIN NINETY DAYS A WRITTEN DESCRIPTION DETAILING HOW THE GRANT FUNDS WERE SPENT THE GRANTEE AGREED TO SUPPLY THE GRANTOR WITH SUCH INFORMATION AS MAY BE NECESSARY OR DESIRABLE TO PERMIT THE GRANTOR TO REVIEW THE APPLICATION OF GRANT FUNDS AND AGREED TO KEEP ITS FINANCIAL AND OTHER RECORDS IN A MANNER SUCH THAT THEY ADEQUATELY

SHOW THE USE OF THE GRANT FUNDS EXCLUSIVELY FOR THE GRANT'S PURPOSES

DLN: 93493307015097

## OMB No 1545-0047

2015

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

WORLD ECONOMIC FORUM USA INC

Name of the organization

**Employer identification number** 

			20-3908371			
Pa	rt I Questions Regarding Compensation					
					Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	•	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	•	Health or social club dues or initiation fees			
	☐ Discretionary spending account	•	Personal services (e.g., maid, chauffeur, chef)			
	, , , ,	•				
b	If any of the boxes in line 1a are checked, did the orga reimbursement or provision of all of the expenses desc			1b	Yes	
2	Did the organization require substantiation prior to reii		· · · · · · · · · · · · · · · · · · ·	<del></del>		
	directors, trustees, officers, including the CEO/Execut			2	Yes	
3	Indicate which, if any, of the following the filing organiz organization's CEO/Executive Director Check all that used by a related organization to establish compensat	t apply	Do not check any boxes for methods			
	□ Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Г	Compensation survey or study			
	Form 990 of other organizations	Γ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Pa or a related organization	art V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplementa	al non	qualified retirement plan?	4b		No
с	Participate in, or receive payment from, an equity-base	ed co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and prov		· -			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizatio	ons mu	ıst complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, le compensation contingent on the revenues of	ıne 1a	a, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ine 1a	, did the organization pay or accrue any			
а	The organization?			<b>6</b> a		
b	Any related organization?			6b		
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			7		
8	Were any amounts reported on Form 990, Part VII, pa					
	subject to the initial contract exception described in R	Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		
9	If "Yes" on line 8, did the organization also follow the r section 53 4958-6(c)?	rebutt	able presumption procedure described in Regulations	9		

Schedule J (Form 990) 2015							Page 2
Part III Officers, Director	s, Trustees, Key Er	mployees, and Hig	hest Compensate	<b>ed Employees.</b> Use	duplicate copies if	additional space is	needed.
For each individual whose compens instructions, on row (ii) Do not list <b>Note.</b> The sum of columns (B)(i)-(ii	any individuals that are	not listed on Form 990	, Part VII		-	·	
(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	( <b>F</b> ) Compensation in
	Base (ı) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990

Schedule J (Form 990) 2015

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

Schedule 3 (Form 330) 2013	Page 3							
Part III Supplemental Inform	mation							
Provide the information, explanation, o	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information							
Return Reference	Explanation							
	TRAVEL FOR SPOUSES OF OFFICERS TO THE ORGANIZATION'S MEETINGS MAY BE REIMBURSED IF THESE SPOUSES ARE REPRESENTING THE INSTITUTION AT SUCH EVENTS THE OVERSEAS TRAVEL FOR OUR VICE-CHAIRMAN, BY AGREEMENT, MAY BE OCCASIONALLY IN FIRST CLASS							
, ,	THE CHAIRMAN WAS COMPENSATED BY THE WORLD ECONOMIC FORUM IN SWITZERLAND WHICH ESTABLISHED HIS COMPENSATION USING THE FOLLOWING METHODS - INDEPENDENT COMPENSATION CONSULTANT - COMPENSATION SURVEY OR STUDY - APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE							
CCHEDILLE 1 DART II	COMPENSATION OF BOARD MEMBERS COMPENSATION DAID TO 11M HACEMANN SNABE IS BELATED TO HIS WORLD AT THE WORLD							

Dage 3

Schedule J (Form 990) 2015

SCHEDULE J. PART II ICOMPENSATION OF BOARD MEMBERS COMPENSATION PAID TO JIM HAGEMANN SNABETS RELATED TO HIS WORK AT THE WORLD

Schedule 1 (Form 990) 2015

ECONOMIC FORUM IN SWITZERLAND, BASED ON THE CALENDAR YEAR 2016 HE BECAME CHAIRMAN OF THE ORGANIZATION IN FEBRUARY 12015 COMPENSATION PAID TO CHERYL MARTIN IS RELATED TO HER WORK AT THE WORLD ECONOMIC FORUM IN SWITZERLAND AS HEAD OF INDUSTRIES, BASED ON THE CALENDAR YEAR 2016 SHE BECAME A BOARD MEMBER OF THE ORGANIZATION ON JULY 12, 2016

# Software ID: Software Version:

**EIN:** 20-3908371

Name: WORLD ECONOMIC FORUM USA INC

#### Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title			W-2 and/or 1099-MI:  (ii)  Bonus &  Incentive  compensation	y Employees, and SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D</b> ) Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
1)IM HAGEMANN SNABE CHAIRMAN	(1)	0	0	o	О	0	0	0
	(11)	318,894	0	0	0		-	0
1SARITA NAYYAR	(1)	531,297	84,620	0	22,525	4,585	318,894 643,027	0
CHIEF OPERATING OFFICER	(11)	0	0	0	0			0
2JOHN MOAVENZADEH	(1)	386,105	47.470		22.642	0	0	
SR DIR /MEMBER MGMT COMMITTEE	(11)		47,472	0	23,642	3,960	461,179	
			0	0	0	0	0	0
3MICHAEL DREXLER SR DIR /HEAD FIN & INFRA	(1)	313,907	46,480	0	24,272	1,846	386,505	0
SYS	(11)	0	0	0	0	- 0	.l _	0
4ALAN MARCUS SR DIR /HEAD OF ICT &	(1)	317,850	38,704	0	24,170	0	380,724	0
MEDIA	(11)	0	0	0	0			0
5GIANCARLO BRUNO	(1)	309,683	36,368	0	24,321	1,842	372,214	0
SR DIR /HEAD FIN INSTITUTIONS	(11)	0	0	0	0			0
6ZARA INGILIZIAN	(1)	294,016	07.677		20.527	0	0	
DIR /HEAD OF CONSUMERS	(11)	294,010	27,677	0	20,627	3,707	346,027	
			0	0	0	- 0	0	0
7STEPHAN RUIZ DIR /HEAD OF OPR & FINANCE	(1)	273,130	23,014	0	17,901	2,724	316,769	0
FINANCE	(11)	0	0	0	0	-0	0	0
8PAUL SMYKE SR DIR /HEAD OF N	(1)	405,494	49,392	0	24,482	1,296	480,664	0
AMERICA	(11)	0	0	0	0			0
MARISOL ARGUETA DE	(1)	352,087	42,928	0	22,246	0	417,261	0
9BARILLAS SR DIR /HEAD OF LATIN AMERICA	(11)	0	0	0				
10ELIZABETH DREIER	(1)	288,516		_		0	0	_
SR DIR/HEAD OF FOOD SEC & AGRI		288,310	34,880	0	23,526	3,857	350,779	0
	(11)	0	0	0	0	0	0	0
11ISABEL MAURO HEAD OF	(1)	262,334	22,738	0	24,380	3,960	313,412	0
TELECOMMUNICATIONS	(11)	0	0	0	О	- 0	.l _	o
12MATTHEW BLAKE HEAD OF FIN & MONETARY	(1)	231,628	32,560	0	21,200	0	285,388	0
SYS	(11)	0	0	0	0		-	0
13CHERYL MARTIN	(1)	0	n	0	n	0 0	0	n
BOARD MEMBER	(11)	518,880	23,555		49,660			
		•	25,555		13,000	0	592,095	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493307015097 OMB No 1545-0047 **SCHEDULE N** Liquidation, Termination, Dissolution, or Significant Disposition of Assets (Form 990 or 990-EZ) **2016** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36. ▶ Attach certified copies of any articles of dissolution, resolutions, or plans. Attach to Form 990 or 990-EZ. Open to Public ▶Information about Schedule N (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number WORLD ECONOMIC FORUM USA INC. 20-3908371 Liquidation, Termination, or Dissolution. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I Part I can be duplicated if additional space is needed. 🦈 (a) Description of asset(s) (b) Date of (c) Fair market value of (d) Method of (e) EIN of recipient (f) Name and address of recipient (g) IRC section 1 distributed or transaction distribution asset(s) distributed or determining FMV for of recipient(s) (if amount of transaction asset(s) distributed or tax-exempt) or typeof expenses paid expenses transaction expenses entity 112.020.142 BOOK VALUE LLC ASSETS OF WORLD ECONOMIC FORUM USA 12-31-2016 20-3908371 WORLD ECONOMIC FORUM USA LLC INC 350 MADISON AVENUE 11TH FLOOR NEW YORK, NY 10017 Yes No Did or will any officer, director, trustee, or key employee of the organization 2a No Become a director or trustee of a successor or transferee organization? . . . . . . 2b Yes Become an employee of, or independent contractor for, a successor or transferee organization? . . . . . . . . . 2c Nο 2d No Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution? . . . If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat No 50087Z Schedule N (Form 990 or 990-EZ) (2016)

	ile N (Form 990 or 990-EZ) (2016)								ge <b>2</b>
Pari	Liquidation, Termination, or	Dissolution (	continued)						
	<b>Note.</b> If the organization distributed all of i	ts assets during	the tax year, then Form 9	90, Part X, column (B), l	ine 16 (Total assets), ar	nd line 26 (Total liabilities), should equal -	0-	Yes	No
3	Did the organization distribute its assets in	accordance with	ı its göverning instrument(	s)? If "No." describe in P	art III		3	Yes	
4a Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?								Yes	
<b>b</b> :	If "Yes," did the organization provide such i	notice?					4b	Yes	
5	Did the organization discharge or pay all of	its liabilities in a	accordance with state laws	?			5	Yes	
ā	Did the organization have any tax-exempt l	oonds outstandır	ng during the year?				6a		No
	If "Yes" on line 6a, did the organization disc laws?	harge or defeas	e all of its tax-exempt bor	nd liabilities during the ta	x year in accordance wil	th the Internal Revenue Code and state	6b		No
c :	If "Yes" on line 6b, describe in Part III how	the organization	n defeased or otherwise se	ttled these liabilities If "	No" on line 6b, explain i	n Part III			
Part									
			ed "Yes" on Form 990,	Part IV, line 32, or Fo	rm 990-EZ, line 36. F	Part II can be duplicated if additional	space is	need	ed.
1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	of recip		(ıf
		1	1	1	1				
								V	N-
	Did an inil any afficent diseases because a		. the					Yes	No
	Did or will any officer, director, trustee, or l Become a director or trustee of a successor		<del>-</del>				2a		
	Become a director or trustee of a successor Become an employee of, or independent co		-				2b		
	Become a direct or indirect owner of a succ		_				2c		
	Receive, or become entitled to, compensati		-				2d		
	If the organization answered "Yes" to any o		•	-	•				

Part III Supplemental Information. Provide the information required by Part I, lines 2e and 6c, and Part II, line 2e. Also complete this part to provide any additional information. Return Reference Explanation SCHEDULE N, PART I AS OF JANUARY 1, 2017, THE WORLD ECONOMIC FORUM USA INC (THE "CORPORATION") CONVERTED FROM A DELAWARE NONPROFIT MUTUAL BENEFIT CORPORATION EXEMPT FROM US FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(6) INTO WORLD ECONOMIC FORUM LLC ("FORUM LLC"), A DELAWARE NONPROFIT LIMITED LIABILITY COMPANY WHOSE SOLE MEMBER AND OWNER IS THE WORLD ECONOMIC FORUM (THE "FORUM"), A SWISS FOUNDATION THAT ALSO IS RECOGNIZED AS BEING EXEMPT FROM US FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(6) PURSUANT TO SECTION 18-214 OF THE DELAWARE

Page **3** 

Schedule N (Form 990 or 990-EZ) (2016)

LIMITED LIABILITY COMPANY ACT, FORUM LLC IS DEEMED TO BE A CONTINUATION OF THE CORPORATION, WITH THE CORPORATIONS PURPOSE, ASSETS, EMPLOYEES, CONTRACTS, AND OTHER RIGHTS, PRIVILEGES, POWERS, DEBTS AND OBLIGATIONS AUTOMATICALLY BECOMING THE PURPOSE, ASSETS, EMPLOYEES, CONTRACTS, AND OTHER RIGHTS, PRIVILEGES, POWERS, DEBTS AND OBLIGATIONS OF FORUM LLC FROM AN ACCOUNTING AND TAX REPORTING PERSPECTIVE. THE CONVERSION SIMPLY ALLOWS THE ASSETS, LIABILITIES, AND RESULTS OF OPERATIONS OF THE CORPORATION TO BE CONSOLIDATED WITH

Schedule N (Form 990 or 990-EZ) (2016)

THOSE OF THE FORUM. WHICH IS MORE EFFICIENT FORUM LLC IS TREATED AS A DISREGARDED ENTITY OF THE FORUM FOR US INCOME TAX PURPOSES FORUM LLC'S FUTURE ACTIVITIES WILL BE REPORTED ON THE FORM 990 OF THE FORUM

SCHEDULE N. PART I. LINE 2E IALL OFFICERS AND KEY EMPLOYEES OF WORLD ECONOMIC FORUM USA INC. RETAINED THE SAME TITLE AND BECAME KEY EMPLOYEES WHEN THE IORGANIZATION CONVERTED TO A LIMITED LIABILITY COMPANY

efile GRAPHIC p	rint - DO NOT PROCESS As Filed Data -		DLN:	93493307015097		
SCHEDULE O (Form 990 or 990- EZ)	Complete to provide information for Form 990 or 990-EZ or to prov  Attach to Form Information about Schedule O (Form www.irs.go	for to Form 990 or 990-EZ for responses to specific questions on ovide any additional information. rm 990 or 990-EZ. in 990 or 990-EZ) and its instructions is at gov/form990.  OMB No 1545-004  2016  Open to Public Inspection				
Name of the organizate world economic foru	tion M USA INC Supplemental Information		Employer identi 20-3908371	fication number		
Return Reference		Explanation				
ORGANIZATION'S MISSION STATEMENT - FORM 990, PART III, LINE 1	THE WORLD ECONOMIC FORUM USA IS AN INDITING THE STATE OF THE WORLD BY ENGAGING GIONAL AND INDUSTRY AGENDAS WE ARE THE UM, A NON-PROFIT FOUNDATION HEADQUARTE USA ACTS AS A CENTRE FOR GLOBAL INDUSTRY NIES THAT STRONGLY SUPPORT THE FORUM'S R BUSINESS AND SOCIETY TOGETHER, THESE R'S CRITICAL ISSUES THROUGH INDUSTRY-SPELL AS ACTIVELY CONTRIBUTE TO THE WORLD EITZERLAND, AND REGIONAL EVENTS THE WORLD GLOBAL MEMBERSHIP AND PARTICIPANTS AT OUR ANNUAL MEETING IN DAVOS-KLOSTERS, NUMEROUS HIGH-LEVEL MEETINGS IN NEW YOTHIS INCLUDES THE ANNUAL INDUSTRY PART LECT MEMBER COMPANIES THAT ARE ACTIVEL VEL	INDUSTRY LEADERS IN PARTIE NORTH AMERICAN AFFILIATERED IN GENEVA, SWITZERLARIES FOR OUR INDUSTRY PARTIES FOR OUR INDUSTRY PARTIES IDENTIFY, DISCUSTIFUS INTERSTREES IDENTIFY, DISCUSTIFUS INTERSTREES IDENTIFY, DISCUSTIFUS INTERSTREES IDENTIFY, DISCUSTIFUS INTERSTREES IN ANNUAL SOUR MANY REGIONAL EVENTS, SWITZERLAND IN ADDITION, RK EACH YEAR TO SUPPORT NERSHIP STRATEGY MEETING	NERSHIPS TO SHE OF THE WORLD THE WORLD THE WORLD THE WORLD TO SHE OF THE WORLD THE WORLD THE WORLD THE WORK OF CORN WHICH BRINGS OF THE WORK OF CORN WHICH BRINGS	JAPE GLOBAL RE DECONOMIC FOR ECONOMIC FORUM MEMBER COMPA ABLE CHANGE FO S THEIR SECTO CES, AS WE DS-KLOSTERS, SW UPPORTING OUR THE YEAR, AND A A ORGANIZES DUR CONSTITUENTS S TOGETHER SE		

# Return Explanation Reference

990 Schedule O, Supplemental Information

BOARD OF
DIRECTORS
- FORM 990,
PART VI,
SECTION A,
LINE 1A &

990 Schedule O, Supplemental Information

Return Reference Explanation

GOVERNING
BODY/MANAGEMENTFORM 990, PART VI,
SECTION A. LINE 7A

THE WORLD ECONOMIC FORUM, A SWISS NON-PROFIT FOUNDATION, HAS THE POWER TO APPOINT A
MAJORI
TY OF THE WORLD ECONOMIC FORUM USA'S BOARD OF DIRECTORS

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
GOVERNING BODY/MANAGEMENT- FORM 990, PART VI, SECTION A, LINE 7B	A MAJORITY OF THE ENTIRE BOARD OF DIRECTORS SHALL CONSTITUTE A QUORUM FOR THE TRANSACTION OF BUSINESS IF A MAJORITY OF THE DIRECTORS PRESENT HAVE BEEN APPOINTED BY THE WORLD ECONOM IC FORUM (THE FORUM), A SWISS NON-PROFIT FOUNDATION THE FORUM THUS HAS THE POWER TO MAKE GOVERNANCE DECISIONS OR RATIFY DECISIONS OF THE GOVERNING BODY MADE BY WORLD ECONOMIC FORU M USA'S BOARD OF DIRECTORS

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 REVIEW PROCESS- FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON THE INFORMATION PROVID ED BY THE ORGANIZATION'S HEAD OF FINANCE AND OPERATIONS IT IS THEN REVIEWED AND APPROVED BY THE CHIEF OPERATING OFFICER BEFORE FILING, AND IS ALSO PROVIDED TO THE SENIOR MANAGEMEN T OF THE WORLD ECONOMIC FORUM IN SWITZERLAND FOR COMMENT THE BOARD OF DIRECTORS WAS DISSO LVED ON DECEMBER 31, 2016 PRIOR TO THE FILING OF THIS FORM 990, WHEN THE WORLD ECONOMIC FO RUM USA CONVERTED TO A SINGLE MEMBER LLC, WITH THE WORLD ECONOMIC FORUM IN SWITZERLAND AS ITS SINGLE MEMBER

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
CONFLICT OF INTEREST POLICY- FORM 990, PART VI,SECTION B, LINE 12A	EMPLOYEES HAVE AN OBLIGATION TO CONDUCT BUSINESS WITHIN GUIDELINES THAT PROHIBIT ACTUAL OR POTENTIAL CONFLICTS OF INTEREST THIS POLICY ESTABLISHES THE FRAMEWORK WITHIN WHICH THE FORUM USA WISHES THE BUSINESS TO OPERATE THE PURPOSE OF THESE GUIDELINES IS TO PROVIDE GEN ERAL DIRECTION SO THAT EMPLOYEES MAY SEEK FURTHER CLARIFICATION ON ISSUES RELATED TO THE SUBJECT OF ACCEPTABLE STANDARDS OF OPERATION. AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST OCCURS WHEN AN EMPLOYEE IS IN A POSITION TO INFLUENCE A DECISION THAT MAY RESULT IN A PERSONAL GAIN FOR THAT EMPLOYEE OR FOR A RELATIVE AS A RESULT OF THE FORUM USA'S BUSINESS DEALINGS FOR THE PURPOSES OF THIS POLICY, A RELATIVE IS ANY PERSON WHO IS RELATED BY BLOOD OR MARRIAGE OR WHOSE RELATIONSHIP WITH THE EMPLOYEES IS SIMILAR TO THAT OF PERSONS WHO ARE RELATED BY BLOOD OR MARRIAGE IT IS IMPERATIVE THAT EMPLOYEES DISCLOSE TO THE CHIEF OPERATING OFFICER AS SOON AS POSSIBLE THE EXISTENCE OF ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST SO THAT SAFEGUARDS CAN BE ESTABLISHED TO PROTECT ALL PARTIES PERSONAL GAIN MAY RESULT NO TONLY IN CASES WHERE AN EMPLOYEE OR RELATIVE HAS A SIGNIFICANT OWNERSHIP IN A FIRM WITH WHICH THE FORUM USA DOES BUSINESS BUT ALSO WHEN AN EMPLOYEE OR RELATIVE RECEIVES ANY KICKBA CK, BRIBE, SUBSTANTIAL GIFT, OR SPECIAL CONSIDERATION AS A RESULT OF ANY TRANSACTION OR BUSINESS DEALINGS INVOLVING THE FORUM USA ALL DISCLOSURES REQUIDED BY THIS POLICY ARE TO BE DECLARED IN WRITING TO THE CHIEF OPERATING OFFICER OF THE FORUM USA AS SOON AS IS REASONA BLY POSSIBLE ONCE ONE OR MORE OF THE FOLLOWING OCCURS - WHEN YOU ARE OR BECOME AN OFFICER OR DIRECTOR OF ANY ORGANIZATION, - WHEN YOU RECEIVE ANY SOURCE OF EMPLOYMENT OR CONSULTING INCOME OUTSIDE THE FORM USA (PLEASE SEE OUTSIDE ACTIVITIES POLICY ABOVE), - WHEN ANY FORMAL AND/OR ONGOING RELATIONSHIP WITH ANY CURRENT FORUM USA MEMBER OR PARTNER COMPANY IS FORMAL AND/OR ONGOING RELATIONSHIP WITH ANY CURRENT FORUM USA MEMBER OR PARTNER COMPANY IS FORMAL AND/OR ONGOING RELATIONSHIP WITH ANY CURRENT FORUM USA MEMBER O

## Return Explanation

990 Schedule O, Supplemental Information

12B&12C

CONFLICT	THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY TO REQUIRE DIRECTORS AND OFFICERS TO AN
OF	NUALLY DISCLOSE ANY CONFLICTS OF INTEREST SUCH POLICY WAS IN PLACE IN THE YEAR ENDING DEC
INTEREST	EMBER 31, 2016 THE ORGANIZATION CIRCULATES ANNUAL CONFLICT OF INTEREST QUESTIONNAIRES WHI
POLICY-	CH ARE REVIEWED BY THE CHIEF FINANCIAL OFFICER OF FORUM USA KEY EMPLOYEES ARE REQUIRED TO
FORM	RAISE ANY POTENTIAL CONFLICTS OF INTEREST TO THE CHIEF OPERATING OFFICER OF FORUM USA
990,PART	
VI,SECTION	
B,LN	

Return Reference	Explanation
COMPENSATION REVIEW PROCESS- FORM 990, PART VI, SECTION B, LINE 15	THE CHAIRMAN'S COMPENSATION IS SET BY THE WORLD ECONOMIC FORUM IN SWITZERLAND THE FORUM IN SWITZERLAND WORKED WITH AN EXTERNAL, GLOBALLY RECOGNIZED PARTNER THAT MANAGED CREATING A JOB STRUCTURE, DEFINING LEVELS AND BUILDING PAY RANGES FEWER, BROADER AND OVERLAPPING PAY RANGES WERE ESTABLISHED BASED ON BENCHMARKING WITH 3 SECTORS, INTERNATIONAL ORGANIZATION S, CONSULTING FIRMS AND GENERAL INDUSTRY COMPANIES GENERAL REMUNERATION GUIDELINE FOR THE MANAGING BOARD IS APPROVED BY THE BOARD OF TRUSTEES AS PER THE LAWS GOVERNING THE ORGANIZ ATION OF THE WORLD ECONOMIC FORUM, SWITZERLAND (FORUM SWITZERLAND) THE CHAIRMAN'S COMPENS ATION IS APPROVED BY THE MANAGING BOARD OF FORUM SWITZERLAND IN LINE WITH APPROVED REMUNER ATION GUIDELINE THE VICE-CHAIRMAN VOLUNTARILY WAIVED COMPENSATION EFFECTIVE JULY 1, 2016 THE SALARY REPORTED ON THE FORM 990 REPRESENTS COMPENSATION PAID JANUARY 1, 2016 THROUGH JUNE 30, 2016 THE VICE-CHAIRMAN'S SALARY WAS INITIALLY SET BASED ON A SURVEY OF COMPARABL E POSITIONS AND IN CONSULTATION WITH INDEPENDENT OUTSIDE EXPERTS INCLUDING AN EXECUTIVE SE ARCH FIRM AND EXECUTIVES FROM THE WORLD ECONOMIC FORUM IN SWITZERLAND IT WAS THEN RATIFIE D BY THE BOARD OF DIRECTORS AND HAS NOT BEEN CHANGED SINCE RATIFICATION THE VICE-CHAIRMAN DOES NOT RECEIVE ANY PERFORMANCE-RELATED BONUS OR SIMILAR FORM OF COMPENSATION FOR THE OTHER OFFICERS, THE COMPENSATION PROCESS IS LED BY THE VICE-CHAIRMAN INITIAL SALARY LEVELS ARE SET BASED ON A SURVEY OF COMPARABLE POSITIONS AND IN CONSULTATION WITH INDEPENDENT OUT SIDE EXPERTS INCLUDING AN EXECUTIVE SEARCH FIRM AND EXECUTIVES FROM THE WORLD ECONOMIC FOR MILLAR FORM OF COMPENSATION FOR THE OTHER OFFICERS, THE COMPENSATION PROCESS IS LED BY THE VICE-CHAIRMAN INITIAL SALARY LEVELS ARE SET BASED ON A SURVEY OF COMPARABLE POSITIONS AND IN CONSULTATION WITH INDEPENDENT OUT SIDE EXPERTS INCLUDING AN EXECUTIVE SEARCH FIRM AND EXECUTIVES FROM THE WORLD ECONOMIC FOR MILL BASES THROUGH AN ORGANIZATION-WIDE FORMAL REVIEW PROCESS WHICH IS USED TO DETERMINE ANY APPLICABLE PERFORMANCE RE

Return Explanation
Reference

GOVERNING NO DOCUMENTS RELATED TO GOVERNANCE DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL ST ATEMENTS HAVE BEEN MADE AVAILABLE TO THE PUBLIC DURING CALENDAR YEAR 2016

PART VI, SECTION C, LINE 19

Return Explanation
Reference

FORM 990,	CONVERSION TO AN LLC - SEE SCHEDULE N (65,243,000)
PART XI,	
LINE 9,	
OTHER	
CHANGES	
IN NET	
ASSETS	

Return Explanation
Reference

LINE 11G

FORM 990 DESCRIPTION CONSULTING FEES TOTAL FEES 440894
PART IX

Return Explanation
Reference

FORM 990 DESCRIPTION EMPLOYEES NY TEAM WORKING GVA TOTAL FEES 1701888
PART IX
LINE 11G

Return Explanation
Reference

FORM 990 DESCRIPTION INVESTMENT CHARGES TOTAL FEES 115334
PART IX
LINE 11G

Return Explanation
Reference

FORM 990 DESCRIPTION BANK FEES/SERVICE CHARGE TOTAL FEES 5853
PART IX
LINE 11G

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990 DESCRIPTION PAYROLL FEES TOTAL FEES 52304
PART IX
LINE 11G

Return Explanation
Reference

FORM 990 DESCRIPTION MISC EXPENSES TOTAL FEES 83689
PART IX
LINE 11G

Return Explanation
Reference

FORM 990 DESCRIPTION MANAGING CONTRACT FEE TOTAL FEES 5437982
PART IX
LINE 11G

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493307015097 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public ► Attach to Form 990. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** WORLD ECONOMIC FORUM USA INC 20-3908371 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity (d) (e) (b) (c) Legal domicile (state Total income End-of-year assets Primary activity or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	s Complete if the	organization a	nswered	"Yes" on Fo	orm 990	, Part IV,	, line 34 bed	cause it had one	or more	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal domi or foreign	cıle (state	(d) Exempt Code	e section	Public ch	(e) arity status n 501(c)(3))	<b>(f)</b> Direct controlling entity	Sectio (13) c en	( <b>g)</b> n 512(b) ontrolled ntity?
(1)WORLD ECONOMIC FORUM 91-93 ROUTE DE LA CAPITE CH COLOGNYGVA SZ 98-0459408	GLOBAL MTGS	Si	Z	501(C)(6)					Yes	No No
										_
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.	Cat	: No 5013	35Y				Schedule R (Fo	m 990) 2	2016

(a) Name, address, and EIN related organization	of	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	total income	(g) Share of e end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ral or	(k) Percenta ownersh
								Yes	No		Yes	No	
									+				
									+				
Identification of Related Organ because it had one or more relate						ization ans	wered "Yes	on F	orm 9	 90, Part IV,	line	34	
		s a corporation		st during th	(d) controlling Typentity (C of	(e)	wered "Yes  (f)  Share of total Income	Share	(g) e of end- year assets		) ntage	  Se  (1	L3) conti entity
because it had one or more relate  (a)  Name, address, and EIN of	ed organizations treated a	s a corporation	on or tru:  (c)  egal  micile  or foreign	st during th	(d) controlling Typentity (C of	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Percei	) ntage	  Se  (1	ection 5: 13) conti entity
because it had one or more relate  (a)  Name, address, and EIN of	ed organizations treated a	s a corporation	on or tru:  (c)  egal  micile  or foreign	st during th	(d) controlling Typentity (C of	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Percei	) ntage	  Se  (1	ection 5: 13) conti entity
<b>(a)</b> Name, address, and EIN of	ed organizations treated a	s a corporation	on or tru:  (c)  egal  micile  or foreign	st during th	(d) controlling Typentity (C of	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Percei	) ntage	  Se  (1	ection 5: 13) conti entity
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because it had one or more relate  (a)  Name, address, and EIN of	ed organizations treated a	s a corporation	on or tru:  (c)  egal  micile  or foreign	st during th	(d) controlling Typentity (C of	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Percei	) ntage	  Se  (1	ection 5 13) cont entity
because it had one or more relate  (a)  Name, address, and EIN of	ed organizations treated a	s a corporation	on or tru:  (c)  egal  micile  or foreign	st during th	(d) controlling Typentity (C of	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Percei	) ntage	  Se  (1	ection 5 13) cont entity
because it had one or more relate  (a)  Name, address, and EIN of	ed organizations treated a	s a corporation	on or tru:  (c)  egal  micile  or foreign	st during th	(d) controlling Typentity (C of	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Percei	) ntage	  Se  (1	ection 5 13) cont entity

Schedule R (Form 990) 2016

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
Parformance of convices or membership or fundraising colicitations by related organization(c)	1 m	Yes	

<b>g</b>			
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	<b>1</b> i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	1j		No
	114		No
k Lease of facilities, equipment, or other assets from related organization(s)	1K		NO
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	1p	Yes	<u> </u>
	14		
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
			$\vdash$
	I '	I	I

Sharing of paid employees with related organization(s)				<del>-</del> -	
p Reimbursement paid to related organization(s) for expenses				<u>  •                                 </u>	es es
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q Y	es
r Other transfer of cash or property to related organization(s)				1r	No
${f s}$ Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complet	te this line, including covered	relationships and tran	saction thresholds	-	
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount inv	olved
	Transaction			amount inv	plved
	Transaction			amount inve	olved
	Transaction			amount inve	olved
	Transaction			amount invi	olved

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		Are all partners section		Are all partners section		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g ?	<b>(k)</b> Percentage ownership
			514)	Yes	No	<b>!</b> ,		Yes	No		Yes	No					
										Schedul	e R (Form	1 990	0) 2016				

